

**Attachment C**  
**Early Detection Works**  
**Reimbursement Fee Schedule**  
**Effective for services on or after July 1, 2006**

*Early Detection works will no longer accept women who have insurance.*

*The rare exception to this is that a woman with insurance that **does not cover any outpatient services** might be eligible.  
Please contact your Regional Nurse or the EDW staff for prior authorization.*

The following CPT codes have been approved for billing through the Early Detection Works Program.

## Office Visits

<b>Codes</b>	<b>Type of Service</b>	<b>KS Fee Schedule</b>	<b>Comments</b>
99201	New patient visit - 10 minutes face-to-face	\$34.18	Level 1 - Focused problem
99202	New patient visit - 20 minutes face-to-face	\$61.00	Level 2 - Expanded
99203	New patient visit - 30 minutes face-to-face	\$90.84	Level 3 - Detailed
99211	Established patient - 5 minutes face-to-face	\$19.69	Level 1 - Focused problem
99212	Established patient - 10 minutes face-to-face	\$35.84	Level 2 - Expanded
99213	Established patient - 15 minutes face-to-face	\$49.17	Level 3 - Detailed
99214	Established patient - 25 minutes face-to-face	\$77.33	Level 4 - Detailed
99241	Consultation - 15 minutes face-to-face	\$46.92	Focused Problem
99242	Consultation - 30 minutes face-to-face	\$86.23	Expanded
99243	Consultation - 40 minutes face-to-face	\$114.99	Detailed
5000	Administration Fee	\$15.00	One-time enrollment fee payable when patient transfers from a non-EDW provider

## Breast

<b>Codes</b>	<b>Type of Service</b>	<b>KS Fee Schedule</b>	<b>Comments</b>
76092	Screening mammogram	\$77.84	Two views, each breast
76092TC	<i>Technical Component</i>	\$42.84	<i>Charge for service performed</i>
76092PC	<i>Professional Component</i>	\$35.00	<i>Physician's Reading Fee</i>
76090	Diagnostic unilateral mammogram	\$71.58	One breast
76090TC	<i>Technical Component</i>	\$36.58	<i>Charge for service performed</i>
76090PC	<i>Professional Component</i>	\$35.00	<i>Physician's Reading Fee</i>
76091	Diagnostic bilateral mammogram	\$88.88	Two breasts
76091TC	<i>Technical Component</i>	\$45.50	<i>Charge for service performed</i>
76091PC	<i>Professional Component</i>	\$43.38	<i>Physician's Reading Fee</i>
76645	Diagnostic ultrasound	\$63.58	For determination of fluid or solid mass in breast(s)
76645TC	<i>Technical Component</i>	\$36.58	<i>Charge for service performed</i>
76645PC	<i>Professional Component</i>	\$27.00	<i>Physician's Reading Fee</i>

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## FNA

Codes	Type of Service	KS Fee Schedule	Comments
10021	Fine needle aspiration without imaging guidance	\$122.73	
10022	Fine needle aspiration with imaging guidance	\$135.16	
88172	Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen(s)	\$48.12	
88172TC	Technical Component	\$16.19	Charge for service performed
88172PC	Professional Component	\$31.94	Physician's Reading Fee
88173	Interpretation of FNA	\$125.80	
88173TC	Technical Component	\$52.12	Charge for service performed
88173PC	Professional Component	\$73.68	Physician's Reading Fee

## Excisional Biopsy

All biopsies are for diagnostic purposes and exclude treatment.

Codes	Type of Service	KS Fee Schedule	Comments
19100	Percutaneous, needlecore, not using imaging guidance	\$122.04	Surgical Fee
19100FF	Facility Fee	\$329.73	Facility Fee
19101	Open, incisional biopsy	\$281.24	Surgical Fee
19101FF	Facility Fee	\$441.62	Facility Fee
19102	Percutaneous, needle core, using imaging guidance	\$207.39	Surgical Fee
19102FF	Facility Fee	\$441.62	Facility Fee
19103	Percutaneous, automated vacuum assisted or rotating biopsy device, using imaging guidance	\$531.36	Surgical Fee
19103FF	Facility Fee	\$441.62	Facility Fee
19120	Excision of cyst	\$381.67	Surgical Fee
19120FF	Facility Fee	\$504.99	Facility Fee
19125	Excision of breast lesion, identified by preoperative placement of radiological marker, open, single	\$410.52	Surgical Fee
19125FF	Facility Fee	\$504.99	Facility Fee
19126	Excision of breast lesion, identified by preoperative placement of radiological marker, open, single	\$154.70	Surgical Fee
19290	Preoperative placement of needle localization wire	\$145.21	
19291	Preoperative placement of needle localization wire, each add'l. lesion	\$65.23	
19295	Image guided placement, metallic localization clip, percutaneous	\$90.11	

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## Incisional Biopsy

All biopsies are for diagnostic purposes and exclude treatment.

<b>Codes</b>	<b>Type of Service</b>	<b>KS Fee Schedule</b>	<b>Comments</b>
19000	Puncture aspiration of cyst of breast	\$100.24	
19001	Puncture aspiration of cyst of breast, each add'l. cyst	\$25.33	

## Radiology

<b>Codes</b>	<b>Type of Service</b>	<b>KS Fee Schedule</b>	<b>Comments</b>
76095	Stereotactic localization guidance for breast biopsy or needle placement	\$329.04	
76095TC	<i>Technical Component</i>	\$249.02	<i>Charge for service performed</i>
76095PC	<i>Professional Component</i>	\$80.02	<i>Physician's Reading Fee</i>
76096	Mammographic guidance for needle placement, breast	\$73.26	
76096TC	<i>Technical Component</i>	\$45.50	<i>Charge for service performed</i>
76096PC	<i>Professional Component</i>	\$27.76	<i>Physician's Reading Fee</i>
76098	Radiological examination, surgical specimen	\$22.52	
76098TC	<i>Technical Component</i>	\$14.52	<i>Charge for service performed</i>
76098PC	<i>Professional Component</i>	\$8.00	<i>Physician's Reading Fee</i>
76942	Ultrasonic guidance for needle placement, imaging supervision & interpretation	\$130.10	
76942TC	<i>Technical Component</i>	\$96.57	<i>Charge for service performed</i>
76942PC	<i>Professional Component</i>	\$33.53	<i>Physician's Reading Fee</i>

## Lab and Pathology

<b>Codes</b>	<b>Type of Service</b>	<b>KS Fee Schedule</b>	<b>Comments</b>
88305	Breast biopsy interpretation	\$93.89	
88305TC	<i>Technical Component</i>	\$53.67	<i>Charge for service performed</i>
88305PC	<i>Professional Component</i>	\$40.22	<i>Physician's Reading Fee</i>
88307	Surgical pathology, gross & microscopic exam requiring microscopic evaluation of surgical margins	\$168.68	
88307TC	<i>Technical Component</i>	\$84.16	<i>Charge for service performed</i>
88307PC	<i>Professional Component</i>	\$84.52	<i>Physician's Reading Fee</i>
88331	Pathology consultation during surgery, first tissue block, with frozen section(s), single specimen	\$83.89	
88331TC	<i>Technical Component</i>	\$20.72	<i>Charge for service performed</i>
88331PC	<i>Professional Component</i>	\$63.16	<i>Physician's Reading Fee</i>
88332	Pathology consultation during surgery, each add'l tissue block with frozen section(s)	\$38.76	
88332TC	<i>Technical Component</i>	\$7.53	<i>Charge for service performed</i>
88332PC	<i>Professional Component</i>	\$31.22	<i>Physician's Reading Fee</i>

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## General Anesthesia

Codes	Type of Service	KS Fee Schedule	Comments
ANESTH	General anesthesia	\$275.00	Anesthesiologist fee

## Cervical

Codes	Type of Service	KS Fee Schedule	Comments
88164	Pap test	\$14.76	
88141	Cytopathology, cervical or vaginal, interpretation by physician	\$21.45	
87621	Lab, HPV, amplified probe technique	\$49.04	
57452	Colposcopy without biopsy	\$104.36	Surgical Fee
57454	Colposcopy with biopsy & endocervical curettage	\$150.52	Surgical Fee
57455	Colposcopy with biopsy	\$139.21	Surgical Fee
57456	Colposcopy with endocervical curettage	\$131.02	Surgical Fee
57460	Colposcopy of the cervix with loop electrode biopsy(s) of the cervix	\$311.53	Diagnostic use only. Requires pre-authorization
57461	Colposcopy with loop electrode conization of the cervix	\$344.83	Diagnostic use only. Requires pre-authorization
57500	Biopsy, single or multiple, or local excision of lesion, with or without fulguration	\$124.89	Diagnostic use only. Requires pre-authorization
57505	Endocervical curettage (not done as part of a dilation & curettage)	\$95.61	Diagnostic use only. Requires pre-authorization
57520	Conization of cervix, with or without fulguration, with or without dilation & curettage, with or without repair; cold knife or laser	\$297.22	Diagnostic use only. Requires pre-authorization
57520FF	Facility Fee	\$441.62	Applies only when performed in a facility setting
57522	Loop electrode excision	\$243.31	Diagnostic use only. Requires pre-authorization
57522FF	Facility Fee	\$441.62	Applies only when performed in a facility setting
58100	Endometrial sampling with or without endocervical sampling, without cervical dilation	\$106.82	Diagnostic use only. Requires pre-authorization
88305	Cervical biopsy interpretation	\$93.89	
88305TC	Technical Component	\$53.67	Charge for service performed
88305PC	Professional Component	\$40.22	Physician's Reading Fee

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